



## MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO. / 890896

APPLICANT(S)

CLAIMS

|               | AS I          | AS FILED       |  | TER<br>NOMENT | AFTER 2nd AMENDMENT                              |  |
|---------------|---------------|----------------|--|---------------|--|--|
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| 88    |             |               | $\prod_{-}$ | $T_{-}$  | $T_{\perp}$  | T        |
| 89    |             |               |             |          |              |          |
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| 91    | $T_{\perp}$ |               | $T_{-}$     | T        |              |          |
| 92    |             |               | <u> </u>    |          |              | T        |
| 93    |             |               |             |          |              |          |
| 94    |             |               |             |          |              |          |
| 95    |             | -             |             |          |              |          |
| 96    |             |               | T           |          |              |          |
| 97    |             |               |             |          |              |          |
| 98    |             |               | Τ           |          |              |          |
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\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

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